

RECEIPT # 64477
 AMOUNT \$ 250
 SUMMONS ISSUED Y-3
 LOCAL RULE 4.1 _____
 WAIVER FORM _____
 MCF ISSUED _____
 BY DPTY. CLK. pl
 DATE 6-14-05

**UNITED STATES DISTRICT COURT
 FOR THE DISTRICT OF MASSACHUSETTS**

CIVIL ACTION NO.

MOHAMED DJEBBAR – A95-477-062

Plaintiff

v.

**ALBERTO GONZALES, U.S. Attorney General;
 U.S. DEPARTMENT OF HOMELAND SECURITY;
 and U.S. CITIZENSHIP AND IMMIGRATION
 SERVICES,
 Defendants.**

35 - 11243 JLT

**PLAINTIFF'S ORIGINAL COMPLAINT FOR
 WRIT OF MANDAMUS**

MAGISTRATE JUDGE Alexander

This action is brought by the Plaintiff, Mohamed Djebbar – Alien Registration Number A95-477-062, against the Defendants to compel action on an application to adjust status properly filed by the Plaintiff. The application remains within the jurisdiction of the Defendants, who have improperly withheld action on said application to the Plaintiff's detriment.

PARTIES

1. The Plaintiff, **Mohamed Djebbar**, is a 31 year old native and citizen of Algeria who last entered the United States on February 2, 2000. The Plaintiff applied for adjustment of status pursuant to INA section 245(i) on April 22, 2002. The Plaintiff resides at 44 Revere Parkway, #2, Revere, Massachusetts.

18

2. The Defendant, **Alberto Gonzales**, is being sued in his official capacity as the Attorney General of the United States. In this capacity, he is responsible for the administration of the immigration laws, pursuant to 8 U.S.C., section 1103, and he possesses extensive discretionary powers to grant certain relief to aliens. More specifically, the Attorney General is responsible

for the adjudication of applications to adjust status pursuant to section 245 of the Immigration and Nationality Act (“INA”). 8 U.S.C. section 1426. The U.S. Citizenship and Immigration Services is an agency within the Department of Justice to whom the Attorney General’s authority has in part been delegated, and is subject to the Attorney General’s supervision.

3. The Defendants, **Department of Homeland Security (hereinafter “DHS”) and the U.S. Citizenship and Immigration Services (hereinafter “CIS”)** are the agencies responsible for enforcing the INA and for adjudicating the application to adjust status filed by the Plaintiff.

JURISDICTION

4. Jurisdiction in this case is proper under 28 U.S.C. sections 1331 and 1361, 5 U.S.C. section 701 et seq., and 28 U.S.C. section 2201 et seq. Relief is requested pursuant to said statutes.

VENUE

5. Venue is proper in this court, pursuant to 28 U.S.C. section 1391(e), in that this is an action against officers and agencies of the United States in their official capacities, brought in the District where a Defendant resides and where a substantial part of the events or omissions giving rise to the Plaintiff’s claim occurred. More specifically, the Plaintiff’s application to adjust status was properly filed and, to the Plaintiff’s knowledge, remains pending with the CIS office in Boston, Massachusetts.

EXHAUSTION OF REMEDIES

6. The Plaintiff has exhausted his administrative remedies. On April 5, 2004 the Plaintiff attended an interview at the CIS in Boston, MA in connection with his application to adjust status. After the interview the Plaintiff and his attorney made many inquiries regarding the status

of the application. However, as of this date, the CIS has failed to make a decision on the Plaintiff's application.

CAUSE OF ACTION

7. On February 2, 2000 the Plaintiff entered the United States without inspection and has resided in the United States since the date of his entry. On April 17, 2001, the Plaintiff's employer filed an application for alien labor certification on the Plaintiff's behalf. On October 18, 2001, the Department of Labor approved the application. By notice dated February 25, 2002, the Vermont Service Center approved the Plaintiff's employer's visa petition and on April 22, 2002, the Plaintiff filed an application to adjust status pursuant to INA section 245(i). (Copies of the Plaintiff's Application to Adjust Status – Form I-485 – and supporting documents, together with receipt notices, as filed with the Vermont Service Center are attached hereto as Exhibit A). The Plaintiff paid all required fees for his applications and has complied in all respects with the Immigration and Nationality Act regarding his application to adjust status. On April 5, 2004, the Plaintiff attended an interview on the application to adjust status at the Boston CIS office. The Exams Officer did not approve the application at the interview, but indicated there were no problems with the case and that the Plaintiff would receive a decision in the mail.

8. Subsequent to April 5, 2004, the Plaintiff and his attorney have made many inquiries regarding the status of the application to adjust status. (Copies of the letters of inquiry are attached hereto as Exhibit B). As of this date, the CIS has not responded to the inquiries and has failed and/or refused to adjudicate the application.

9. In the most recent inquiry regarding the status of his application the Plaintiff notified the CIS that his sister in Algeria died and he desperately wanted to see his family. The government's failure to adjudicate the Plaintiff's application to adjust status has caused the Plaintiff to suffer

constant anxiety and has put his life on hold. The Plaintiff was not able to attend his sister's funeral and continues to grieve without being able to see his family members in Algeria. The CIS' failure to adjudicate his application has had a profound impact on the Plaintiff and he is entitled to a decision on the application.


10. The Defendants, in violation of the Administrative Procedures Act, 5 U.S.C. section 701 et seq., are unlawfully withholding or unreasonably delaying action on Plaintiff's application and have failed to carry out the adjudicative functions delegated to them by law with regard to the Plaintiff's case. The Plaintiff is entitled to a decision on his application to adjust status and demands that the Defendants make such a decision. The Plaintiff now seeks a Court order requiring the Defendants to adjudicate his application.

PRAYERS FOR RELIEF

WHEREFORE the Plaintiff respectfully prays that this honorable Court enter an order:

- (a) requiring Defendants to adjudicate the Plaintiff's application to adjust status;
- (b) awarding the Plaintiff all costs and reasonable attorney's fees associated with this matter; and
- (c) granting such other relief at law and in equity as justice may require.

Respectfully submitted,
Mohamed Djebbar
By his attorney,



Anthony Drago, Esq. (BBO#552437)
Anthony Drago, Jr., P.C.
35 India Street
Boston, MA 02110
(617) 357-0400

6-14-05



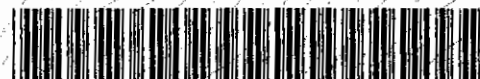
THE UNITED STATES OF AMERICA

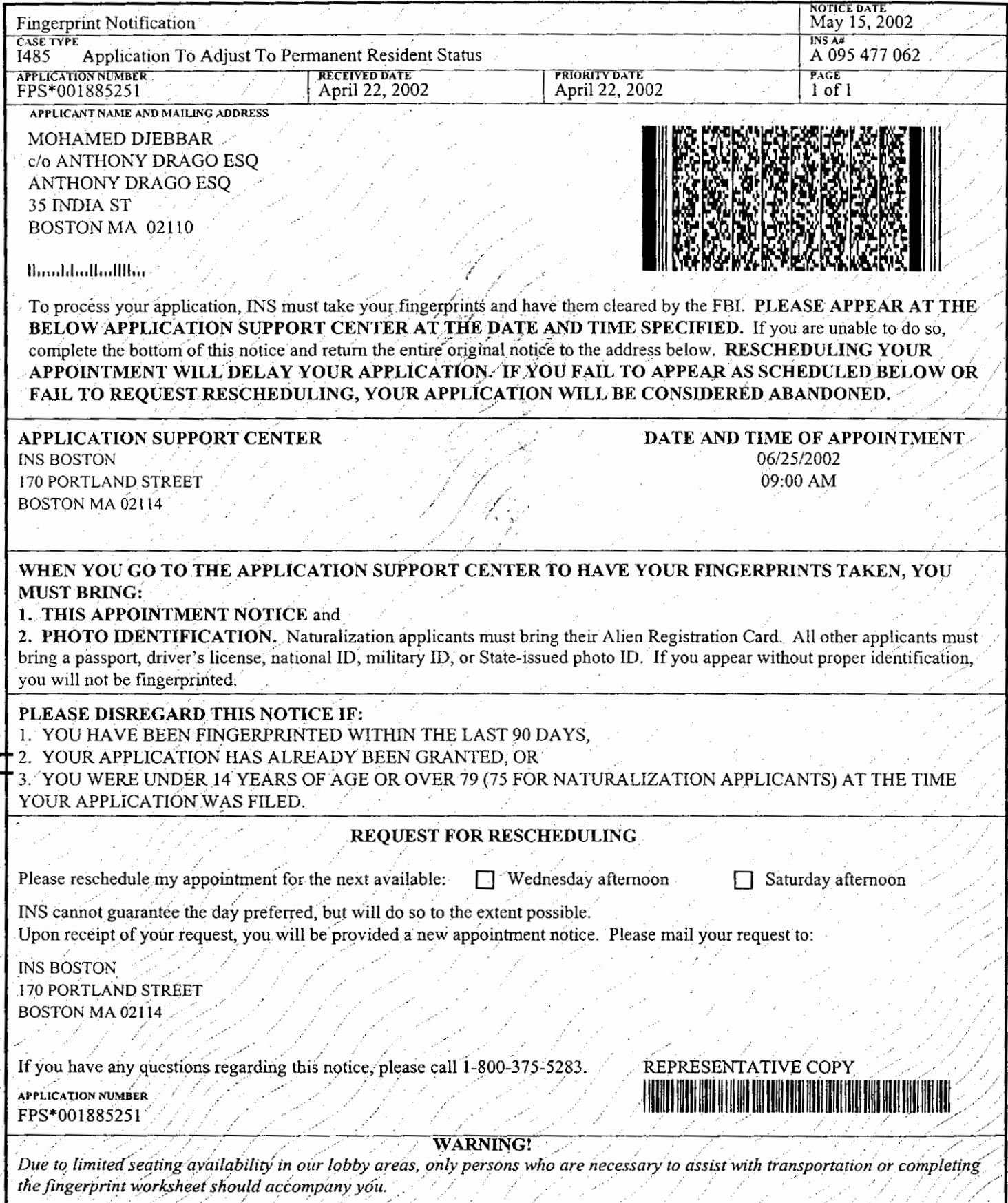


RECEIPT NUMBER EAC-02-174-51749		CASE TYPE I485 APPLICATION TO ADJUST TO PERMANENT RESIDENT STATUS
RECEIVED DATE April 22, 2002	PRIORITY DATE	APPLICANT A95 477 062 DJEBBAR, MOHAMED
NOTICE DATE April 27, 2002	PAGE 1 of 1	
ANTHONY DRAGO ESQ LAW OFFICE OF ANTHONY DRAGO 35 INDIA ST BOSTON MA 02110		Notice Type: Receipt Notice Amount received: \$ 1305.00 Section: Adjustment as direct beneficiary of immigrant petition
<p>The above application or petition has been received. It usually takes 365 to 540 days from the date of this receipt for us to process this type of case. Please notify us immediately if any of the above information is incorrect.</p> <p>We will send you a written notice as soon as we make a decision on this case. You can also use the phone number (802) 527-4913 to obtain case status information direct from our automated system 24 hours a day with a touch-tone phone and the receipt number for this case (at the top of this notice).</p> <p>If you have other questions about possible immigration benefits and services, filing information, or Immigration and Naturalization Service forms, please call the INS National Customer Service Center (NCSC) at 1-800-375-5283. If you are hearing impaired, please call our TDD at 1-800-767-1833.</p> <p>If you have access to the Internet, you can also visit the INS at www.ins.usdoj.gov. Here you can find valuable information about forms and filing instructions, and about general immigration services and benefits. At present, this site does not provide case status information.</p>		

Please see the additional information on the back. You will be notified separately about any other cases you filed.

IMMIGRATION & NATURALIZATION SERVICE
VERMONT SERVICE CENTER
75 LOWER WELDEN STREET
SAINT ALBANS VT 05479-0001
Customer Service Telephone: (802) 527-4913





ANTHONY DRAGO, JR., P.C.*

35 INDIA STREET
2ND FLOOR
BOSTON, MASSACHUSETTS 02110

TELEPHONE: 617-357-0400

FACSIMILE: 617-357-8353

*Also admitted in New York

April 18, 2002

BY U.S. PRIORITY MAIL

U.S. INS

Eastern Service Center

75 Lower Welden St.

St. Albans, VT 05479-0001

Re: **Application to Adjust Status - Form I-485 - Approved Visa Petition**
Beneficiary: Mohamed Djebbar


Dear Sir/Madam:

Enclosed please find the following documents filed by Mohamed Djebbar the beneficiary of an approved visa petition from his employer: 1. Medical Exam and photos; 2. G-28 with Money Orders totaling \$1,425.00; 3. Application to Adjust Status - Form I-485; 4. Form I-485 Supplement A; 5. Form I-765; 6. Forms G-325 and I-181; 7. Notice of Approval of Form I-140 with priority date of April 17, 2001 plus copy of labor certification approval with priority date prior to April 30, 2001; 8. Birth Certificate for Mohamed Djebbar and Copy of Passport plus proof of physical presence in United States on December 21, 2000.

As you can see from the enclosed documentation the beneficiary is clearly eligible to adjust his status under INA section 245(i) based on the original priority date for his application for alien labor certification. Should you have any questions regarding the petitions or any of the supporting documentation, please contact me. Otherwise, kindly approve the application for employment authorization, schedule my client for fingerprints and notify this office when the application to adjust status has been approved.

Thank you for your attention to this matter.

Sincerely,


Anthony Drago

U.S. Department of Justice
Immigration and Naturalization ServiceNotice of Entry of Appearance
as Attorney or Representative

Appearance - An appearance shall be filed on this form by the attorney or representative appearing in each case. Thereafter, substitution may be permitted upon the written withdrawal of the attorney or representative of record or upon notification of the new attorney or representative. When an appearance is made by a person acting in a representative capacity, his personal appearance or signature shall constitute a representation that under the provisions of this chapter he is authorized and qualified to represent. Further proof of authority to act in a representative capacity may be required. **Availability of Records** - During the time a case is pending, and except as otherwise provided in 8CFR 103.2(b), a party to a proceeding or his attorney or representative shall be permitted to examine the record of proceeding in a Service office. He may, in conformity with 8 CFR 103.10, obtain copies of Service records or information therefrom and copies of documents or transcripts of evidence furnished by him. Upon request, he/she may, in addition, be loaned a copy of the testimony and exhibits contained in the record of proceeding upon giving his/her receipt for such copies and pledging that it will be surrendered upon final disposition of the case or upon demand. If extra copies of exhibits do not exist, they shall not be furnished free on loan; however, they shall be made available for copying or purchase of copies as provided in 8 CFR 103.10.

In re:

Date 03/25/2002


File No. N/A

I hereby enter my appearance as attorney for (or representative of), and at the request of, the following named person(s):

Name Mohamed Djebbar	<input type="checkbox"/> Petitioner <input type="checkbox"/> Beneficiary	<input checked="" type="checkbox"/> Applicant
Address (Apt. No.) (Number & Street) (City) (State) (ZIP Code) 2 44 Revere Beach Parkway Revere MA 02151		
Name	<input type="checkbox"/> Petitioner <input type="checkbox"/> Beneficiary	<input type="checkbox"/> Applicant
Address (Apt. No.) (Number & Street) (City) (State) (ZIP Code)		

Check applicable item(s) below:

- ☒ 1. I am an attorney and a member in good standing of the bar of the Supreme Court of the United States or of the highest court of the following State, territory, insular possession, or District of Columbia
Massachusetts and am not under a court or administrative agency order suspending, enjoining, restraining, disbaring, or otherwise restricting me in practicing law.
- ☐ 2. I am an accredited representative of the following named religious, charitable, social service, or similar organization established in the United States and which is so recognized by the Board:
- ☐ 3. I am associated with _____ the attorney of record who previously filed a notice of appearance in this case and my appearance is at his request. (If you check this item, also check item 1 or 2 whichever is appropriate.)
- ☐ 4. Others (Explain fully.)

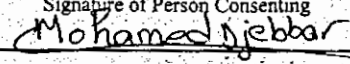
SIGNATURE 	COMPLETE ADDRESS Law Office of Anthony Drago 35 India Street Boston MA 02110
NAME (Type or Print) Anthony Drago, Esq.	TELEPHONE NUMBER 617-357-0400 617-357-8353

PURSUANT TO THE PRIVACY ACT OF 1974, I HEREBY CONSENT TO THE DISCLOSURE TO THE FOLLOWING NAMED ATTORNEY OR REPRESENTATIVE OF ANY RECORD PERTAINING TO ME WHICH APPEARS IN ANY IMMIGRATION AND NATURALIZATION SERVICE SYSTEM OF RECORDS:

Anthony Drago, Esq.

(Name of Attorney or Representative)

THE ABOVE DISCLOSURE IS IN CONNECTION WITH THE FOLLOWING MATTER:

Name of Person Consenting Mohamed Djebbar	Signature of Person Consenting 	Date 03/25/2002
---	--	---------------------------

(NOTE: Execution of this box is required under the Privacy Act of 1974 where the person being represented is a citizen of the United States or an alien lawfully admitted for permanent residence.)

U.S. Department of Justice
Immigration and Naturalization Service

Form I-485, Application to Register
Permanent Residence or Adjust Status

START HERE - Please Type or Print

Part 1. Information about you.

Family Name Djebbar	Given Name Mohamed	Middle Initial
Address - C/O		
Street Number and Name 44 Revere Beach Parkway		Apt. # 2
City Revere		
State MA	Zip Code 02151	
Date of Birth (month/day/year) 09/30/1975	Country of Birth Algeria	
Social Security # N/A 015-86-3436	A # (if any) N/A 095 477 062	
Date of Last Arrival (month/day/year) 02/02/2000	I-94 # N/A	
Current INS Status E.W.I.	Expires on (month/day/year) N/A	

Part 2. Application Type. (Check one)

I am applying for adjustment to permanent resident status because

- a. ☒ an immigrant petition giving me an immediately available immigrant visa number has been approved. (Attach a copy of the approval notice-- or a relative, special immigrant juvenile, or special immigrant military visa petition filed with this application that will give you an immediately available visa number, if approved.)
- b. ☐ My spouse or parent applied for adjustment of status or was granted lawful permanent residence in an immigrant visa category that allows derivative status for spouses and children.
- c. ☐ I entered as a K-1 fiancé(e) of a U.S. citizen whom I married within 90 days of entry, or I am the K-2 child of such a fiancé(e) [Attach a copy of the fiancé(e) petition approval notice and the marriage certificate.]
- d. ☐ I was granted asylum or derivative asylum status as the spouse or child of a person granted asylum and am eligible for adjustment.
- e. ☐ I am a native or citizen of Cuba admitted or paroled into the U.S. after January 1, 1959, and thereafter have been physically present in the U.S. for at least one year.
- f. ☐ I am the husband, wife, or minor unmarried child of a Cuban described in (e) and am residing with that person, and was admitted or paroled into the U.S. after January 1, 1959, and thereafter have been physically present in the U.S. for at least one year.
- g. ☐ I have continuously resided in the U.S. since before January 1, 1972.
- h. ☐ Other basis of eligibility. Explain. (If additional space is needed, use a separate piece of paper.)

I am already a permanent resident and am applying to have the date I was granted permanent residence adjusted to the date I originally arrived in the U.S. as a nonimmigrant or parolee, or as of May 2, 1964, whichever date is later, and: (Check one)

- i. ☐ I am a native or citizen of Cuba and meet the description in (e), above.
- j. ☐ I am the husband, wife or minor unmarried child of a Cuban, and meet the description in (f), above.

FOR INS USE ONLY

Returned	Receipt
Resubmitted	
Reloc Sent	
Reloc Rec'd	
<input type="checkbox"/> Applicant Interviewed	
Section of Law	
<input type="checkbox"/> Sec. 209(b), INA <input type="checkbox"/> Sec. 13, Act of 9/11/57 <input type="checkbox"/> Sec. 245, INA <input type="checkbox"/> Sec. 249, INA <input type="checkbox"/> Sec. 1 Act of 11/2/66 <input type="checkbox"/> Sec. 2 Act of 11/2/66 <input type="checkbox"/> Other	
Country Chargeable	
Eligibility Under Sec. 245	
<input type="checkbox"/> Approved Visa Petition <input type="checkbox"/> Dependent of Principal Alien <input type="checkbox"/> Special Immigrant <input type="checkbox"/> Other	
Preference	
Action Block	
To Be Completed by Attorney or Representative, if any <input checked="" type="checkbox"/> Fill in box if G-28 is attached to represent the applicant VOLAG# ATTY State License # 552437	

Continued on back.

Part 3. Processing Information

A. City/Town/Village of Birth Oran		Current occupation Cook	
Your mother's first name Merlem		Your father's first name Mehdi	
Give your name exactly how it appears on your Arrival/Departure Record (Form I-94) N/A			
Place of last entry into the U.S. (City/State) Houston, Texas		In what status did you last enter? <i>(Visitor, Student, exchange alien, crewman, temporary worker, without inspection, etc.)</i> EWI	
Were you inspected by a U.S. Immigration Officer? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Nonimmigrant Visa Number N/A		Consulate where Visa was issued N/A	
Date Visa was issued (month/day/year) N/A	Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Marital Status <input type="checkbox"/> Married <input checked="" type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed	
Have you ever before applied for permanent resident status in the U.S.? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If you checked "Yes," give date and place of filing and final disposition.			

B. List your present husband/wife, all of your sons and daughters (if you have none, write "none". If additional space is needed, use separate paper).

Family Name N/A	Given Name	Middle Initial	Date of Birth (month/day/year)
Country of Birth	Relationship	A #	Applying with you? <input type="checkbox"/> Yes <input type="checkbox"/> No
Family Name	Given Name	Middle Initial	Date of Birth (month/day/year)
Country of Birth	Relationship	A #	Applying with you? <input type="checkbox"/> Yes <input type="checkbox"/> No
Family Name	Given Name	Middle Initial	Date of Birth (month/day/year)
Country of Birth	Relationship	A #	Applying with you? <input type="checkbox"/> Yes <input type="checkbox"/> No
Family Name	Given Name	Middle Initial	Date of Birth (month/day/year)
Country of Birth	Relationship	A #	Applying with you? <input type="checkbox"/> Yes <input type="checkbox"/> No
Family Name	Given Name	Middle Initial	Date of Birth (month/day/year)
Country of Birth	Relationship	A #	Applying with you? <input type="checkbox"/> Yes <input type="checkbox"/> No

C. List your present and past membership in or affiliation with every political organization, association, fund, foundation, party, club, society, or similar group in the United States or in other places since your 16th birthday. Include any foreign military service in this part. If none, write "none". Include the name(s) of organization(s), location(s), dates of membership from and to, and the nature of the organization(s). If additional space is needed, use a separate piece of paper.

None

Part 3. Processing Information (Continued)

Please answer the following questions. (If your answer is "Yes" on any one of these questions, explain on a separate piece of paper. Answering "Yes" does not necessarily mean that you are not entitled to register for permanent residence or adjust status).

1. Have you ever, in or outside the U.S.:
 - a. knowingly committed any crime of moral turpitude or a drug-related offense for which you have not been arrested? ☐ Yes ☒ No
 - b. been arrested, cited, charged, indicted, fined, or imprisoned for breaking or violating any law or ordinance, excluding traffic violations? ☐ Yes ☒ No
 - c. been the beneficiary of a pardon, amnesty, rehabilitation decree, other act of clemency or similar action? ☐ Yes ☒ No
 - d. exercised diplomatic immunity to avoid prosecution for a criminal offense in the U.S.? ☐ Yes ☒ No
2. Have you received public assistance in the U.S. from any source, including the U.S. government or any state, county, city, or municipality (other than emergency medical treatment), or are you likely to receive public assistance in the future? ☐ Yes ☒ No
3. Have you ever:
 - a. within the past 10 years been a prostitute or procured anyone for prostitution, or intend to engage in such activities in the future? ☐ Yes ☒ No
 - b. engaged in any unlawful commercialized vice, including, but not limited to, illegal gambling? ☐ Yes ☒ No
 - c. knowingly encouraged, induced, assisted, abetted or aided any alien to try to enter the U.S. illegally? ☐ Yes ☒ No
 - d. illicitly trafficked in any controlled substance, or knowingly assisted, abetted or colluded in the illicit trafficking of any controlled substance? ☐ Yes ☒ No
4. Have you ever engaged in, conspired to engage in, or do you intend to engage in, or have you ever solicited membership or funds for, or have you through any means ever assisted or provided any type of material support to, any person or organization that has ever engaged or conspired to engage, in sabotage, kidnapping, political assassination, hijacking, or any other form of terrorist activity? ☐ Yes ☒ No
5. Do you intend to engage in the U.S. in:
 - a. espionage? ☐ Yes ☒ No
 - b. any activity a purpose of which is opposition to, or the control or overthrow of, the Government of the United States, by force, violence or other unlawful means? ☐ Yes ☒ No
 - c. any activity to violate or evade any law prohibiting the export from the United States of goods, technology or sensitive information? ☐ Yes ☒ No
6. Have you ever been a member of, or in any way affiliated with, the Communist Party or any other totalitarian party? ☐ Yes ☒ No
7. Did you, during the period March 23, 1933 to May 8, 1945, in association with either the Nazi Government of Germany or any organization or government associated or allied with the Nazi Government of Germany, ever order, incite, assist or otherwise participate in the persecution of any person because of race, religion, national origin or political opinion? ☐ Yes ☒ No
8. Have you ever engaged in genocide, or otherwise ordered, incited, assisted or otherwise participated in the killing of any person because of race, religion, nationality, ethnic origin, or political opinion? ☐ Yes ☒ No
9. Have you ever been deported from the U.S., or removed from the U.S. at government expense, excluded within the past year, or are you now in exclusion or deportation proceedings? ☐ Yes ☒ No
10. Are you under a final order of civil penalty for violating section 274C of the Immigration Act for use of fraudulent documents or have you, by fraud or willful misrepresentation of a material fact, ever sought to procure, or procured, a visa, other documentation, entry into the U.S., or any other immigration benefit? ☐ Yes ☒ No
11. Have you ever left the U.S. to avoid being drafted into the U.S. Armed Forces? ☐ Yes ☒ No
12. Have you ever been a J nonimmigrant exchange visitor who was subject to the two-year foreign residence requirement and not yet complied with that requirement or obtained a waiver? ☐ Yes ☒ No
13. Are you now withholding custody of a U.S. Citizen child outside the U.S. from a person granted custody of the child? ☐ Yes ☒ No
14. Do you plan to practice polygamy in the U.S.? ☐ Yes ☒ No

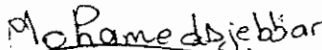
Continued on back

Form I-485 (Rev. 02/07/00)N Page 3

Part 4. Signature. *(Read the information on penalties in the instructions before completing this section. You must file this application while in the United States.)*

I certify, under penalty of perjury under the laws of the United States of America, that this application and the evidence submitted with it is all true and correct. I authorize the release of any information from my records which the INS needs to determine eligibility for the benefit I am seeking.

Selective Service Registration. The following applies to you if you are a man at least 18 years old, but not yet 26 years old, who is required to register with the Selective Service System: I understand that my filing this adjustment of status application with the Immigration and Naturalization Service authorizes the INS to provide certain registration information to the Selective Service System in accordance with the Military Selective Service Act. Upon INS acceptance of my application, I authorize INS to transmit to the Selective Service System my name, current address, Social Security number, date of birth and the date I filed the application for the purpose of recording my Selective Service registration as of the filing date. If, however, the INS does not accept my application, I further understand that, if so required, I am responsible for registering with the Selective Service by other means, provided I have not yet reached age 26.

Signature	Print Your Name	Date	Daytime Phone Number
	Mohamed Djebbar	03/25/2002	781-289-6734

Please Note: If you do not completely fill out this form, or fail to submit required documents listed in the instructions, you may not be found eligible for the requested document and this application may be denied.

Part 5. Signature of person preparing form if other than above. *(Sign Below)*

I declare that I prepared this application at the request of the above person and it is based on all information of which I have knowledge.

Signature	Print Your Name	Date	Daytime Phone Number
	Anthony Drago, Esq.	4-18-02	617-357-0400
Firm Name and Address	Law Office of Anthony Drago 35 India Street, Boston, MA 02110		

U.S. Department of Justice
Immigration and Naturalization Service

Supplement A to Form I-485

START HERE - Please Type or Print

Part 1. Information about applicant

Family Name Djebbar	First Name Mohamed	Middle Name
Address - C/O		
Street Number and Name 44 Revere Beach Parkway	Apt. Suite 2	
City Revere	State or Province MA	
Country USA	ZIP/Postal Code 02151	
INS A # N/A	Date of Birth (month/day/year) 09/30/1975	Country of Birth Algeria

Part 2. Basis for Eligibility (check one)

1. On Form I-485, Part 2, I checked application type (check one):

- a. ☒ An immigrant petition. Go to #2.
b. ☐ My spouse or parent applied. Go to #2.
c. ☐ I entered as a K-1 fiancé. Stop Here. Do Not File This Form.
d. ☐ I was granted asylum. Stop Here. Do Not File This Form.
e. ☐ I am a native or citizen of Cuba. Go to #3.
f. ☐ I am the husband, wife or child of a Cuban. Go to #3.
g. ☐ I have continuously resided in the U.S. Stop Here. Do Not File This Form.
h. ☐ Other. Go to #2
i. ☐ I am already a permanent resident. Stop Here. Do Not File This Form.
j. ☐ I am already a permanent resident and am the husband, wife or unmarried child of a Cuban Stop Here. Do Not File This Form.

2. I have filed Form I-360 and I am applying for adjustment of status as a special immigrant juvenile court dependent or a special immigrant who has served in the United States Armed Forces (check one).

- ☐ Yes Stop Here. Do Not File This Form. ☒ No Go to #3.

3. On Form I-485, Part 2, I checked block (e) or (f) and I last entered the United States legally after having been inspected and admitted or paroled. ☐ Yes Stop Here. Do Not File This Form. ☒ No Go to #11.

4. I last entered the United States (check one):

- ☐ As a stowaway. Go to #11. ☐ Legally without a visa as a visitor for tourism or business. Go to #5.
☐ Legally as a crewman (D-1/D-2 visa). Go to #11. ☐ Legally as a parolee. Go to #5.
☒ Without inspection. Go to #11. ☐ Legally with another type of visa (show type _____). Go to #5.
☐ Legally in transit without visa status. Go to #11.

5. I last entered the United States legally without a visa as a visitor for tourism or business, and I am applying for adjustment of status as the spouse, unmarried child (under 21 years of age), parent, widow or widower of a United States citizen (check one).

- ☐ Yes Stop Here. Do Not File This Form. ☐ No Go to #6.

6. I last entered the United States legally as a parolee, or with a visa (except as a crewman), or as a Canadian citizen without a visa, and I am applying for adjustment of status (check one).

- ☐ As the spouse, unmarried child less than 21 years old, parent, widow or widower of a United States citizen. Stop Here. Do Not File This Form.
☐ As a special immigrant retired international organization employee or family member of an international organization employee or as a special immigrant physician; and I have filed Form I-360. Stop Here. Do Not File This Form.
☐ Under some other category. Go to #7.

FOR INS USE ONLY

Returned	Receipt
Resubmitted	
Reloc Sent	
Reloc Rec'd	
Interviewed	
File Reviewed	Class of Adjustment Code:
To Be Completed by Attorney or Representative, if any	
<input checked="" type="checkbox"/> Check if G-28 is attached showing you represent the petitioner	
VOLAG#	
ATTY State License # 552437	

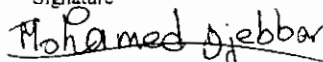
Part 2. Continue.

7. I am a national of the (former) Soviet Union, Vietnam, Laos or Cambodia who last entered the United States legally as a public interest parolee after having been denied refugee status, and I am applying for adjustment of status under Public Law 101-167 (check one).
☐ Yes Stop Here. Do Not File This Form. ☐ No Go to #8.
8. I have been employed in the United States after January 1, 1977 without INS authorization (check one).
☐ Yes Go to #9. ☐ No Go to #10.
9. I am applying for adjustment of status under the Immigration Nursing Relief Act (INRA); I was employed without INS authorization only on or before November 29, 1990, and I have always maintained a lawful immigration status while in the United States after November 5, 1986 (check one):
☐ Yes Stop Here. Do Not File This Form. ☐ No Go to #10.
10. I am now in lawful immigration status; and I have always maintained a lawful immigration status while in the United States after November 5, 1986 (check one).
☐ Yes Stop Here. Do Not File This Form.
☐ No, but I believe the INS will determine that my failure to be in or maintain a lawful immigration status was through no fault of my own or for technical reasons. Stop Here. Do Not File This Form, Attach an explanation regarding this question to your Form I-485 application.
 No Go to #11.
11. I am unmarried and less than 17 years old (check one).
☐ Yes Stop Here. File This Form and Form I-485. Pay only the fee required with Form I-485.
☒ No Go to #12.
12. I am the unmarried child of a legalized alien and am less than 21 years old, or I am the spouse of a legalized alien; and I have attached a copy of my receipt or approval notice showing that I have properly filed Form I-817, Application for Voluntary Departure under the Family Unity Program (check one).
☐ Yes Stop Here. File This Form and Form I-485. Pay only the fee required with Form I-485.
☒ No Go to #13.
13. File The Form and Form I-485. You must pay the additional sum:
 \$ 220.00 - Fee required with Form I-485 * and
 \$1,000.00 - Additional sum under section 245(i) of the Act

 \$1,220.00 - Total amount you must pay.
- *If you filed Form I-485 separately, attach a copy of your filing receipt and pay only the additional sum of \$1000.00. In #11 and / or #12, show the answer you would have given on the date you filed Form I-485.

Part 3. Signature. Read the information on penalties in the instruction before completing this section. If someone helped you prepare the petition he or she must complete Part 4.

I certify, under penalty of perjury under the laws of the United States of America, that this application, and the evidence submitted with it, is all true and correct. I authorize the release of any information from my records which the Immigration and Naturalization Service needs to determine eligibility for the benefit I am seeking.

Signature 	Print Your Name Mohamed Djebbar	Date 03-25-02	Daytime Telephone No. 781-289-6734
---	------------------------------------	------------------	---------------------------------------

Please Note: If you do not completely fill out this form or fail to submit required documents listed in the instructions, you may not be found eligible for the requested document and this application may be denied.

Part 4. Signature of person preparing form if other than above. (Sign Below)

I declare that I prepared this application at the request of the above person and it is based on all information of which I have knowledge.

Signature 	Print Your Name Anthony Drago, Esq.	Date 4-18-02	Daytime Telephone No. 617-357-0400
---	--	-----------------	---------------------------------------

Firm Name and Address
Law Office of Anthony Drago
35 India Street

Boston

MA 02110

Do Not Write in This Block

Remarks	Action Stamp	Fee Stamp
A#		
Applicant is filing under §274a.12 _____		
<input type="checkbox"/> Application Approved. Employment Authorized / Extended (Circle one) _____ until _____ (Date). _____ (Date).		
Subject to the following conditions: _____		
<input type="checkbox"/> Application Denied.		
<input type="checkbox"/> Failed to establish eligibility under 8 CFR 274a.12(a) or (c).		
<input type="checkbox"/> Failed to establish economic necessity as required in 8 CFR 274a.12(c) (14), (18) and 8 CFR 214.2(f)		

I am applying for: ☒ Permission to accept employment
☐ Replacement (of lost employment authorization document).
☐ Renewal of my permission to accept employment (attach previous employment authorization document).

1. Name (Family Name in CAPS) (First) (Middle) Djebbar Mohamed	11. Have you ever before applied for employment authorization from INS? <input type="checkbox"/> Yes (if yes, complete below) <input checked="" type="checkbox"/> No
2. Other Names Used (Include Maiden Name) N/A	Which INS office? _____ Date(s) _____
3. Address in the United States (Number and Street) (Apt. Number) 44 Revere Beach Parkway 2	Results (Granted or Denied - attach all documentation) _____
(Town or City) (State/Country) (ZIP Code) Revere MA USA 02151	12. Date of Last Entry into the U.S. (Month/Day/Year) 02/02/2000
4. Country of Citizenship/Nationality Algeria Algerian	13. Place of Last Entry into the U.S. Houston, Texas
5. Place of Birth (Town or City) (State/Province) (Country) Oran Algeria Algeria	14. Manner of Last Entry (Visitor, Student, etc.) EWI
6. Date of Birth (Month/Day/Year) 7. Sex 09/30/1975 <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	15. Current Immigration Status (Visitor, Student, etc.) Adjustment Pending
8. Marital Status <input type="checkbox"/> Married <input checked="" type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced	16. Go to Part 2 of the instructions, Eligibility Categories. In the space below, place the letter and number of the category you selected from the instructions (For example, (a)(8), (c)(17)(iii), etc.). Eligibility under 8 CFR 274a.12 (C) (9) ()
9. Social Security Number (Include all Numbers you have ever used) N/A	
10. Alien Registration Number (A-Number) or I-94 Number (if any) N/A N/A	

Certification

Your Certification: I certify, under penalty of perjury under the laws of the United States of America, that the foregoing is true and correct. Furthermore, I authorize the release of any information which the Immigration and Naturalization Service needs to determine eligibility for the benefit I am seeking. I have read the instructions in Part 2 and have identified the appropriate eligibility category in Block 16.

Signature <i>Mohamed Djebbar</i>	Telephone Number 781-289-6734	Date 08.25.02
-------------------------------------	---	-------------------------

Signature of Person Preparing Form if Other Than Above: I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.

Print Name Anthony Drago, Esq. Law Office of Anthony Drago 35 India Street, Boston, MA 02110	Address _____	Signature <i>Anthony Drago</i>	Date 4-18-02
--	------------------	-----------------------------------	------------------------

Initial Receipt	Resubmitted	Relocated		Completed		
		Rec'd	Sent	Approved	Denied	Returned

Immigration and Naturalization Service

BIOGRAPHIC INFORMATION

Approval expires 4-30-85

(Family name) DJEBBAR	(First name) Mohamed	(Middle name)	<input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE	BIRTHDATE (Mo-Day-Yr.) 09/30/1975	NATIONALITY Algerian	FILE NUMBER A- N/A
ALL OTHER NAMES USED (including names by previous marriages) N/A			CITY AND COUNTRY OF BIRTH Oran Algeria		SOCIAL SECURITY NO. (If any) N/A	
FATHER Djebbar	FAMILY NAME Drai	FIRST NAME Mehdi	DATE, CITY AND COUNTRY OF BIRTH (if known) 02/1937 Masscara, Algeria		CITY AND COUNTRY OF RESIDENCE Oran Algeria	
MOTHER (Maiden name) Mariam	FAMILY NAME Mariam	FIRST NAME Mariam	DATE, CITY AND COUNTRY OF BIRTH (if known) 1948 Masscara, Algeria		CITY AND COUNTRY OF RESIDENCE Oran Algeria	
HUSBAND (if none, so state) OR WIFE N/A	FAMILY NAME (For wife, give maiden name)	FIRST NAME	BIRTHDATE	CITY & COUNTRY OF BIRTH	DATE OF MARRIAGE	PLACE OF MARRIAGE
FORMER HUSBANDS OR WIVES (If none, so state)						
FAMILY NAME (For wife, give maiden name)		FIRST NAME	BIRTHDATE	DATE & PLACE OF MARRIAGE	DATE AND PLACE OF TERMINATION OF MARRIAGE	
APPLICANT'S RESIDENCE LAST FIVE YEARS, LIST PRESENT ADDRESS FIRST						
STREET AND NUMBER		CITY	PROVINCE OR STATE	COUNTRY	FROM MONTH YEAR	TO MONTH YEAR
44 Revere Beach Parkway		Revere	MA	USA	02 2000	PRESENT TIME
APPLICANT'S LAST ADDRESS OUTSIDE THE UNITED STATES OF MORE THAN ONE YEAR						
STREET AND NUMBER		CITY	PROVINCE OR STATE	COUNTRY	FROM MONTH YEAR	TO MONTH YEAR
27 Corbali Morsle		Oran	Oran	Algeria	09 1975	02 2000
APPLICANT'S EMPLOYMENT LAST FIVE YEARS. (IF NONE, SO STATE.) LIST PRESENT EMPLOYMENT FIRST						
FULL NAME AND ADDRESS OF EMPLOYER				OCCUPATION (SPECIFY)	FROM MONTH YEAR	TO MONTH YEAR
El Paso Enchiladas 3125 Faneuil Hall, Boston, MA, USA				Cook	03 2000	PRESENT TIME
Rest.Serv. of the Police Hamman Bouhedj, Oran Algeria				Cook	01 1997	10 1999
Show below last occupation abroad if not shown above. (Include all information requested above.)						
THIS FORM IS SUBMITTED IN CONNECTION WITH APPLICATION FOR: <input type="checkbox"/> NATURALIZATION <input type="checkbox"/> OTHER (SPECIFY): <input checked="" type="checkbox"/> STATUS AS PERMANENT RESIDENT				SIGNATURE OF APPLICANT <i>Djebbar Mohamed</i> DATE 3-11-002		
Are all copies legible? <input checked="" type="checkbox"/> Yes				If your native alphabet is other than roman letters, write your name in your native alphabet here.		

PENALTIES: SEVERE PENALTIES ARE PROVIDED BY LAW FOR KNOWINGLY AND WILLFULLY FALSIFYING OR CONCEALING A MATERIAL FACT.

APPLICANT:

BE SURE TO PUT YOUR NAME AND ALIEN REGISTRATION NUMBER IN THE BOX OUTLINED BY HEAVY BORDER BELOW.

COMPLETE THIS BOX (Family Name)	(Given name)	(Middle name)	(Alien registration number)
DJEBBAR	Mohamed		N/A

DEPARTMENT OF JUSTICE

Immigration & Naturalization Service

PROCESSING SHEET

Application or
Petition Form No. _____Filing Date: _____
File No. N/AData Collection for Alien Documentation,
Identification & Telecommunications System (ADIT) and I-181

Please print or type information requested below:

NAME: Mohamed Djebbar

STREET ADDRESS: 44 Revere Beach Parkway 2

CITY: Revere

STATE/ZIP CODE: MA 02151

SEX

☒ Male☐ Female

Date of Birth:

09/30/1975

CITY/TOWN/VILLAGE
OF BIRTH: OranCOUNTRY OF
BIRTH: AlgeriaCOUNTRY OF
NATIONALITY: AlgeriaCOUNTRY OF LAST
RESIDENCE: AlgeriaMARITAL STATUS: ☒ Single ☐ Married ☐ Widowed ☐ Divorced ☐ Separated

OCCUPATION:

Cook

MOTHER'S FIRST NAME:

Meriem

FATHER'S FIRST NAME:

Mehdi

DO NOT WRITE BELOW THIS LINE

N.I. class at time of adjustment	Year adm. to U.S. or year cng. to present NI class	<u>Approval Notice, form I-797:</u> Classification: _____ Priority Date: _____
Place last NIV issued (U.S. Consular Post)	Date of issuance of last NIV	
NUMBER OF LAST NIV	CLASSIFICATION OF LAST NIV	
I-94 NUMBER		



RECEIPT NUMBER EAC-02-043-51590		CASE TYPE I140 IMMIGRANT PETITION FOR ALIEN WORKER
RECEIPT DATE November 21, 2001	PRIORITY DATE April 17, 2001	PETITIONER BARAKA LLC DBA EL PASO ENCHILADAS
NOTICE DATE February 25, 2002	PAGE 1 of 1	BENEFICIARY DJEBBAR, MOHAMMED

ANTHONY DRAGO ESQ
 LAW OFFICE OF ANTHONY DRAGO
 35 INDIA ST
 BOSTON MA 02110

Notice Type: Approval Notice
 Section: Skilled Worker or
 Professional,
 Sec.203(b)(3)(A)(i) or (ii)

The above petition has been approved. The petition indicates that the person for whom you are petitioning is in the United States and will apply for adjustment of status. The information submitted with the petition shows that the person for whom you are petitioning is not eligible to file an adjustment of status application at this time.

Additional information about eligibility for adjustment of status may be obtained from the local INS office serving the area where the person for whom you are petitioning lives.

Until the person for whom you are petitioning files an adjustment application, or application for an immigrant visa, this approved petition will be stored in this office. If the person for whom you are petitioning decides to apply for an immigrant visa outside the United States based on this petition, the petitioner should file Form I-824, Application for Action on an Approved Application or Petition, with this office to request that we send the petition to the Department of State National Visa Center (NVC).

The NVC processes all approved immigrant visa petitions that require consular action. The NVC also determines which consular post is the appropriate consulate to complete visa processing. It will then forward the approved petition to that consulate.

THIS FORM IS NOT A VISA NOR MAY IT BE USED IN PLACE OF A VISA.

Please see the additional information on the back. You will be notified separately about any other cases you filed.

IMMIGRATION & NATURALIZATION SERVICE
 VERMONT SERVICE CENTER
 75 LOWER WELDEN STREET
 SAINT ALBANS VT 05479-0001
 Customer Service Telephone: (802) 527-4913



U.S. DEPARTMENT OF LABOR
EMPLOYMENT AND TRAINING ADMINISTRATION
JFK Federal Building E-350
Cambridge Street
Boston, Massachusetts 02203
FINAL DETERMINATION

P2001-MA-01313695

In reply refer to 1TGESC: VXC

October 18, 2001

Mohammed Djebbar
Alien's name

Cook, Specialty, Foreign Food
Alien's Occupation

Baraka, LLC d/b/a El Paso Enchilad
Anthony Drago
c/o Anthony Drago, Jr., P.C.
35 India St. 4th fl
Boston, MA 02110

April 17, 2001
Date of acceptance for processing

The Department of Labor has made a determination on your Application for Employment Certification pursuant to Title 20, Code of Federal Regulations, Part 656 and as required by the Immigration and Nationality Act, as amended.

Form ETA 750 has been certified and is enclosed. This certification must be attached to the I-140 petition and filed with the Immigration and Naturalization Service, U.S. Department of Justice, Eastern Service Center, 75 Lower Welden Street, St. Albans, Vermont 05479-0001.

RAIMUNDO A. LOPEZ
Regional Certifying Officer

cc: State ES Agency
Baraka, LLC d/b/a El Paso Enchilad
Mohammed Djebbar

Attachments: ETA 750A, ETA 750B

ETA 7145PA (REV. MAR., 1990)

U.S. DEPARTMENT OF LABOR
Employment and Training AdministrationAPPLICATION
FOR
ALIEN EMPLOYMENT CERTIFICATION

IMPORTANT: READ CAREFULLY BEFORE COMPLETING THIS FORM

PRINT legibly in ink or use a typewriter. If you need more space to answer questions in this form, use a separate sheet. Identify each answer with the number of the corresponding question. SIGN AND DATE each sheet in original signature.

To knowingly furnish any false information in the preparation of this form and any supplement thereto or to aid, abet, or counsel another to do so is a felony punishable by \$10,000 fine or 5 years in the penitentiary, or both (18 U.S.C. 1001)

PART A. OFFER OF EMPLOYMENT

1. Name of Alien (Family name in capital letter, First, Middle, Maiden) Djebbar Mohamed		2. Present Address of Alien (Number, Street, City and Town, State ZIP code or Province, Country) 44 Revere Beach Parkway #2 Revere MA USA 02151		3. Type of Visa (If in U.S.) N/A										
The following information is submitted as an offer of employment:														
4. Name of Employer (Full name of Organization) Baraka, LLC d/b/a El Paso Enchiladas				5. Telephone 617-723-4134										
6. Address (Number, Street, City and Town, State ZIP code) 3125 Faneuil Hall Marketplace Boston MA 02109														
7. Address Where Alien Will Work (If different from item 6) Same														
8. Nature of Employer's Business Activity Restaurant	9. Name of Job Title Specialty Cook	10. Total Hours Per Week a. Basic 40 b. Overtime	11. Work Schedule (Hourly) 9:00 a.m. 5:00 p.m.	12. Rate of Pay a. Basic \$ 12.57 b. Overtime \$ per hour per hour										
13. Describe Fully the job to be Performed (Duties) Plan menus and cook Mexican style dishes, dinners, desserts, and other foods according to recipes; prepare meats, soups, sauces, vegetables, and other foods prior to cooking. Season and cook food according to prescribed method. Portion and garnish food for serving.														
14. State in detail the MINIMUM education, training, and experience for a worker to perform satisfactorily the job duties described in item 13 above.		15. Other Special Requirements												
EDUCATION (Enter number of years)	Grade School High School College	College Degree Required (specify) Major Field of Study												
TRAINING	No. Yrs. No. Mos.	Type of Training												
EXPERIENCE	Job Offered Yrs. Mos. 2 or 2	Related Occupation (specify) Food Preparation												
16. Occupational Title of Person Who Will Be Alien's Immediate Supervisor Owner				17. Number of Employees Alien Will Supervise 0										
<p>18. 18 2001</p> <p>CERTIFICATION PURSUANT TO THE PROVISIONS OF SECTION 216 (a), (14) OF THE IMMIGRATION AND NATIONALITY ACT AS AMENDED I HEREBY CERTIFY THAT THERE ARE NOT SUFFICIENT U.S. WORKERS AVAILABLE AND THE EMPLOYMENT OF THE ABOVE WILL NOT ADVERSELY AFFECT THE WAGES AND WORKING CONDITIONS OF WORKERS IN THE U.S. SIMILARLY EMPLOYED.</p> <p>Replaces MA 7-50A, B and C (Apr. 1970 edition) which is obsolete.</p> <p><i>Ramundo A Lopez</i> (DATE) (CERTIFYING OFFICER)</p>														
<p>ENDORSEMENTS (Make no entry in section - for Government use only)</p> <table border="1"> <tr> <td colspan="2">Date Forms Received</td> </tr> <tr> <td>L.O.</td> <td>S.O.</td> </tr> <tr> <td>R.O.</td> <td>N.O.</td> </tr> <tr> <td>Ind. Code 5812</td> <td>Occ. Code 313.361-030</td> </tr> <tr> <td colspan="2">Occ. Title COOK SPECIALTY FOREIGN FOOD</td> </tr> </table>					Date Forms Received		L.O.	S.O.	R.O.	N.O.	Ind. Code 5812	Occ. Code 313.361-030	Occ. Title COOK SPECIALTY FOREIGN FOOD	
Date Forms Received														
L.O.	S.O.													
R.O.	N.O.													
Ind. Code 5812	Occ. Code 313.361-030													
Occ. Title COOK SPECIALTY FOREIGN FOOD														

PART B. STATEMENT OF QUALIFICATIONS OF ALIEN

OR ADVICE CONCERNING REQUIREMENTS FOR ALIEN EMPLOYMENT CERTIFICATION: If alien is in the U.S., contact nearest office of Immigration and Naturalization Service. If alien is outside U.S., contact nearest U.S. Consulate.

IMPORTANT: READ ATTACHED INSTRUCTIONS BEFORE COMPLETING THIS FORM.

Print legibly in ink or use a typewriter. If you need more space to fully answer any questions on this form, use a separate sheet. Identify each answer with the number of the corresponding question. Sign and date each sheet.

1. Name of Alien (Family name in capital letters)		First name	Middle name	Maiden name
Djebbar		Mohamed		
2. Present Address (No., Street, City or Town, State or Province and ZIP code)			Country	3. Type of Visa (if in U.S.)
44 Revere Beach Parkway Revere MA USA 02151				NONE
4. Alien's Birthdate (Month, Day, Year)	5. Birthplace (City or Town, State or Province)		Country	6. Present Nationality or Citizenship (Country)
09/30/1975	Oran Algeria			Algerian
7. Address in United States Where Alien Will Reside				
Same as Above				
8. Name and Address of Prospective Employer if Alien has job offer in U.S.				9. Occupation in which Alien is Seeking Work
El Paso Enchiladas 3125 Faneuil Hall Quincy, Market, Boston MA 02109				Specialty Cook
10. *X* the appropriate box below and furnish the information required for the box marked				
a <input type="checkbox"/> Alien will apply for a visa abroad at the American Consulate in		City in Foreign Country		Foreign Country
b <input checked="" type="checkbox"/> Alien is in the United States and will apply for adjustment of status to that of a lawful permanent resident in the office of the Immigration and Naturalization Service at		City		State
		Boston MA		
11. Names and Addresses of Schools, Colleges and Universities Attended (include trade or vocational training facilities)	Field of Study	FROM Month Year	TO Month Year	Degrees or Certificates Received

SPECIAL QUALIFICATIONS AND SKILLS

12. Additional Qualifications and Skills Alien Possesses and Proficiency in the use of Tools, Machines or Equipment Which Would Help Establish if Alien Meets Requirements for Occupation in Item 9.	
13. List Licenses (Professional, journeyman, etc.)	
14. List Documents Attached Which are Submitted as Evidence that Alien Possesses the Education, Training, Experience, and Abilities Represented	
Letter from previous employer.	
Endorsements	DATE REC. DOL
	O.T. & C.
(Make no entry in this section - FOR Government Agency USE ONLY)	

(Items continued on next page)

A-1 Translation
120 Blackstone Street
Boston, MA 02109
(617) 367-1331

Democratic and Popular Algerian Republic

Birth Certificate

COUNTY
Oran

On September thirty, nineteen hundred seventy-five at one forty o'clock was born in Oran, Djebbar Mohamed of masculine sex, son of Djebbar Mehdi, worker at Sonatrach, and of Draï Meriem, no profession, his wife living at Oran.

DISTRICT
Oran

Issued on:

COMMUNITY
Oran

Marginal Notes: Nothing

30/09/1975
DEC7704M130819723
101

Valid outside the country
Signatures follow:

Certified copy

CIVIL STATE
Act No. 12068B
Djebbar, Mohamed

Oran, February 3, 2002
Seal of the Community

(Stamped and signed)

*I have been trained in the French language
and am competent to translate from French to
English and from English to French*

April Bargout

A1 TRANSLATION SERVICES
APPROVED BY
PROFESSOR ABDO K. IBRAHIM

Abdo Ibrahim
3/5/02

WILAYA D'ORAN

DAIRA D'ORAN

COMMUNE D'ORAN

REPUBLIQUE ALGERIENNE
DEMOCRATIQUE ET POPULAIRE

ACTE DE NAISSANCE

Copie intégrale

30/09/1975

DEC7704M130619723101

ETAT CIVIL

N° : **12068B**
DJEBBAR
Mohamed

- (1) En toutes lettres.
(2) Nom et prénoms de l'enfant.
(3) Par le père, le médecin, la sage-femme ou toute autre personne ayant assisté à l'accouchement.

Le (1) : Trente Septembre Mil Neuf Cent Soixante Cinq
Onze heure : Quarante, est né : à Oran
(2) : **DJEBBAR Mohamed**
du sexe : **Masculin** Fils de : **DJEBBAR**
Mehdi **Ouvrier Sonatrach**
et de : **DRAI Meriem** Sans Son épouse
domiciliés : **Oran**

Dressé le (1) :
heure : sur la déclaration
faite (3) :

NEANT

Suivent les signatures :

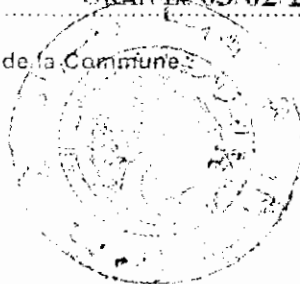
NEANT

VALABLE UNIQUEMENT POUR L'ETRANGER

Pour copie conforme :

ORAN 03/02/2002 11:47:56 CIN° : 273

Cachet de la Commune



Le Président de l'Assemblée
Populaire Commune
de la Commune d'Oran

Signé ARAB FILHI


Marié le :

avec :

Fait le :

D.S. 1977 1337

الجمهورية الجزائرية الديمقراطية الشعبية
REPUBLIQUE ALGERIENNE DEMOCRATIQUE ET POPULAIRE
PEOPLE'S DEMOCRATIC REPUBLIC OF ALGERIA



هذا الجواز ملك الدولة الجزائرية
 Ce passeport est la propriété de l'Etat Algérien
 This passport is the property of the State of Algeria

هذا الجواز يحتوي على 28 صفحة
 Ce passeport contient 28 pages
 This passport contains 28 pages

Nom JEBBAR اللقب جبار
 Name

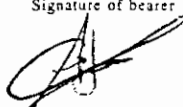
Prénom Mohamed الاسم محمد
 Givenname


Nationalité Algérienne
 Nationality : Algerian جنسية جزائرية


Lieu de naissance Oran مكان الميلاد
 Place of birth

Date de naissance 30. 09. 1975 تاريخ الميلاد
 Date of birth

توقيع حامل الجواز
 Signature du titulaire
 Signature of bearer







01

02

معلومات إضافية

Renseignements Complémentaires
Other informationProfession متربها StagiaireDomicile Oran بو مكاز الإقامةAddress 27 Rue Korbali Morali

الأوصاف

Signalement
DescriptionTaille 1.69 القامة

Height

Yeux Noire لون العينين

Eyes

Cheveux Noire لون الشعر

Hair

Signes particuliers Neaut علامات مميزة

Special Signs

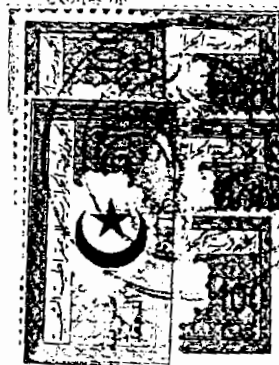
Etabli a مادريشة وهران

Issued at

Le

On 21 JUN 1997 بتاريخ

Expire le

Expires on 20 JUN 2002 ينتهي في

عن المولي

توقيع وختم السلطة التي أصدرت الجواز
Signature and seal of the issuing passport authority

المكلف بالمهمة

امضاء: بن طاطا محمد

04

تمديد Prorogation Renewal

Passport prorogé le

Passport renewed on

à

in

Valable jusqu'au

Valid until

Profession

Domicile

Address

طابع جيلاني
مؤشر
بغتم السلطة

توقيع و ختم السلطة التي مددت الجواز
Signature or cachet de l'autorité qui a prorogé le passeport
Signature and seal of the authority which has renewed the passport

اللقب

Nom

Name

الاسم

Prénom

Givenname

تاريخ الميلاد

Date de naissance / Date of birth

صورة

Photographie
Photography

صورة

Photographie
Photography

صورة

Photographie
Photography

صورة

Photographie
Photography

اللقب

Nom

Name

الاسم

Prénom

Givenname

تاريخ الميلاد

Date de naissance / Date of birth

05

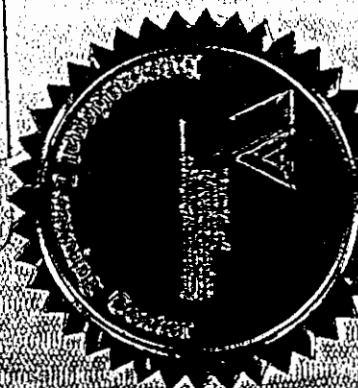
**YMCA OF GREATER BOSTON
EDUCATION AND TRAINING BRANCH
INTERNATIONAL LEARNING CENTER**

**CERTIFICATE OF ACHIEVEMENT
PRESENTED TO**

Mohammed Djebbar

FOR SATISFACTORY COMPLETION OF ENGLISH AS A SECOND LANGUAGE

Beginner I



December 21, 2000

DATE

TEACHER

DIRECTOR

ROGER R. JEAN-CHARLES, M. D.
INTERNAL MEDICINE - NEPHROLOGY
BOSTON UNIVERSITY MEDICAL CENTER
DOCTORS OFFICE BUILDING, SUITE 506
720 HARRISON AVE.
BOSTON, MA 02118-2334

U. S. DEPARTMENT OF JUSTICE
Immigration and Naturalization
J. F. Kennedy Building
Boston, MA 02203

RE: MOHAMED DJEBBAR

THE BACK OF THIS DOCUMENT HAS AN ARTIFICIAL WATERMARK PRINTED IN A SPECIAL WHITE INK.

Fleet

PERSONAL MONEY ORDER

HOLD THE DOCUMENT AT A SMALL ANGLE TO SEE THIS SECURITY FEATURE

380293322

81200
PAY

Memo

MAR 08, 02

NOT VALID OVER \$1000

***1,000.00

TO THE ORDER OF

***1,000*DOLLARS*AND*00*CENTS*

US Immigration and Naturalization Service

Signature: Diehbar Mohamed


STREET ADDRESS

CITY / STATE / ZIP

555000 1021004001 68000380293322

THE VARIABLE TONE BACKGROUND AREA OF THIS DOCUMENT CHANGES COLOR GRADUALLY AND SMOOTHLY FROM DARKER TONES AT BOTH TOP AND BOTTOM TO THE LIGHTEST TONE IN THE MIDDLE

03/08/02 75-53
919

 INTERNATIONAL
MONEY ORDER

97106152760 TravelersExpressMoneyGram

PAY TO THE ORDER OF: US Immigration + N. Service

PURCHASER, SIGNER FOR DRAWER: Gebbar Mohamed

PURCHASER, BY SIGNING YOU AGREE TO THE SERVICE CHARGE AND OTHER TERMS ON THE REVERSE SIDE

ADDRESS: Payable Thru
WF National Bank South Central
Faribault, MN

ISSUER/DRAWER:
TRAVELERS EXPRESS COMPANY, INC.

962142021150211
1664042067108276

90

97106152760


9710615276 MONEY ORDER

IMPORTANT - SEE BACK BEFORE CASHING

*** 255.00 ***

TWO HUNDRED ****
FIFTY-FIVE *****
DOLLARS 00 CENTS

03/08/02 75-53
919

 INTERNATIONAL
MONEY ORDER

97106152759 TravelersExpressMoneyGram

PAY TO THE ORDER OF: US Immigration + N. Service

PURCHASER, SIGNER FOR DRAWER: Gebbar Mohamed

PURCHASER, BY SIGNING YOU AGREE TO THE SERVICE CHARGE AND OTHER TERMS ON THE REVERSE SIDE

ADDRESS: Payable Thru
WF National Bank South Central
Faribault, MN

ISSUER/DRAWER:
TRAVELERS EXPRESS COMPANY, INC.

962142021150211
1664042067108275

90

97106152759


9710615275 MONEY ORDER

IMPORTANT - SEE BACK BEFORE CASHING

*** 120.00 ***

ONE HUNDRED ****
TWENTY DOLLARS *
00 CENTS *****

03/08/02 75-53
919

 INTERNATIONAL
MONEY ORDER

97106152748 TravelersExpressMoneyGram

PAY TO THE ORDER OF: US Immigration + N. Service

PURCHASER, SIGNER FOR DRAWER: Gebbar Mohamed

PURCHASER, BY SIGNING YOU AGREE TO THE SERVICE CHARGE AND OTHER TERMS ON THE REVERSE SIDE

ADDRESS: Payable Thru
WF National Bank South Central
Faribault, MN

ISSUER/DRAWER:
TRAVELERS EXPRESS COMPANY, INC.

962142021150211
1664042067108274

90

97106152748

9710615274 MONEY ORDER

IMPORTANT - SEE BACK BEFORE CASHING

*** 50.00 ***

FIFTY DOLLARS **
00 CENTS *****

U.S. Department of Homeland Security
Vermont Service Center
75 Lower Welden Street
St. Albans, VT 05479-0001



**U.S. Citizenship
and Immigration
Services**

March 14, 2005

ANTHONY DRAGO ESQ
LAW OFFICE OF ANTHONY DRAGO
35 INDIA ST
BOSTON MA 02110

Dear Anthony Drago Esq:

On 02/14/2005 you, or the designated representative shown below, contacted USCIS about your case. Some of the key information given to us at that time was the following:

Person who contacted us:	MOHAMMED DJEBBAR
Case type:	I-485 EMPLOYMENT BASED
Filing date:	04/22/2002
Type of Service Requested:	CASE STATUS
Receipt number:	EAC0217451749
Beneficiary:	

The status of this service request is:

Your petition/application has been transferred to the Immigration office listed below on March 4, 2004. Please address your inquiry to:

U.S. Citizenship & Immigration Services
Boston District Office/Government Center
JFK Federal Building Room E160
Boston MA 02203

For future status inquiries of a petition or application filed at this Center you may want to utilize our National Customer Service Center by calling (800) 375-5283. If you would like to obtain forms, filing instructions, case status or schedule an appointment with your local office, please visit our web site at www.uscis.gov (forms and appointments can be obtained from this site). You must use the InfoPass Appointment Scheduler prior to visiting your local office.

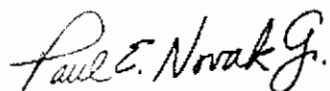
FINAL NOTE: Please remember that every person over the age of 14, who is not a U.S. citizen or in 'A' or 'G' nonimmigrant status, must also notify the Department of Homeland Security within 10 days from when they move. To do this, please complete and mail in Form AR-11.

MAR 14 2005

Page 2 of 2

Please remember that every person over the age of 14 who is not a U.S. citizen or in "A" or "G" nonimmigrant status must also notify the Department of Homeland Security within 10 days from when they move. To do this, please complete and mail in form AR-11. An AR-11 form has been provided with this letter for your convenience. Where possible, please provide an A-number or other identifying numbers. You must complete the Form AR-11 and mail to the London, KY address. Failure to complete all applicable sections may delay processing of the form. Please disregard this notice if you have submitted an AR-11 form to DHS/USCIS within the last two weeks to the London, KY address.

Sincerely,

A handwritten signature in black ink, reading "Paul E. Novak, Jr." in a cursive script.

Paul E. Novak, Jr.
Center Director



THE LAW OFFICES OF
ANTHONY DRAGO, JR., P.C.

35 INDIA STREET, 2ND FLOOR
BOSTON, MA 02112

Anthony Drago, Jr.*
Elizabeth A. Smith **

(TEL) 617-357-0400
(FAX) 617-357-8333

* Admitted in Massachusetts and New York
** Admitted in Massachusetts

March 7, 2005

U.S. Citizenship and Immigration Services
JFK Building
Government Center
Boston, MA 02203
Attn: Exams Officer Richard Simmons

RE: Mohamed Djebbar - A95-477-062 – Application to Adjust Status

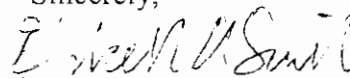
Dear Officer Simmons:

On April 5, 2004 you interviewed Mohamed Djebbar in connection with his application to adjust status. At the time of the interview you indicated that a decision could not be made because one security check had not cleared. Eleven months have now elapsed since the interview and we have yet to receive a decision on the case.

On October 7, 2004, my office sent a status inquiry letter along with a copy of the death certificate for Mr. Djebbar's sister. In the letter, we informed you that Mr. Djebbar's sister had passed away in Algeria and that he was hoping to return to Algeria to grieve with his family. I have enclosed a copy of the correspondence for your reference. Unfortunately, we did not receive a response to our inquiry and Mr. Djebbar's case is still pending.

Please contact me if you need any additional information regarding the case. Otherwise, kindly review the file and issue an approval notice as soon as possible. Thank you for your attention to this matter.

Sincerely,


Elizabeth A. Smith, Esq.

Enclosures

Cc: Mohamed Djebbar



THE LAW OFFICES OF
ANTHONY DRAGO, JR., P.C.

Anthony Drago, Jr.*
Cynthia M. Vega**

35 INDIA STREET, 2ND FLOOR
BOSTON, MA 02110

* Admitted in Massachusetts and New York
** Admitted in Maryland

(TEL) 617-357-0400
(FAX) 617-357-8353

October 7, 2004

U.S. Citizenship and Immigration Services
JFK Building
Government Center
Boston, MA 02203
Attn: Officer Richard Simmons

RE: Mohamed Djebbar - A95-477-062 – Application to Adjust Status

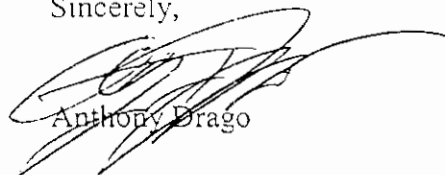
Dear Officer Simmons:

On April 5, 2004 you interviewed Mohamed Djebbar in connection with his application to adjust status. At the time of the interview you indicated that a decision could not be made because one security check had not cleared. Six months have now elapsed since the interview and we have yet to receive correspondence regarding the status of the case.

For your reference I have enclosed a copy of the death certificate for Mr. Djebbar's sister. As you can imagine her death has been very traumatic for Mr. Djebbar's family, especially since his sister was only 19 years old. Due to the circumstances Mr. Djebbar would like to visit his family in Algeria, but requires his residence in order to return to this country.

Kindly review the file for this case and issue an approval as soon as possible. Should you require additional documents in support of the application, please contact me. Thank you for your attention to this matter.

Sincerely,



Anthony Drago

Cc: Mohamed Djebbar

- Translation -

People's Democratic Republic of Algeria

Copy of Death certificate

Prefecture of :ORAN

Department of :ORAN

Municipality of : ORAN

Civil status :

N° 1814

Family book .

14_1958

On 26th of September 2004 was registered the death of :

DJEBBAR ZOHRA In: ORAN

Date of Birth : March 31st 1985 In: ORAN

Father's name : Djebbar Mehdi

Mother's maiden name : Draï Meriem

Copy true of the original

Oran on 09-28-04

On behalf of the registrar

Signed Mentfekh .

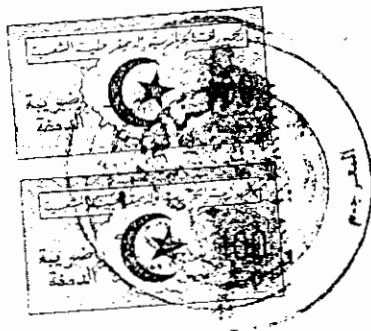
Certified true translation Seal of the above mentioned municipality.

Name and firstname:

DJEBBAR ZOHRA

Judicial Registrar

R. TAB



Oran, 29th September 2004

الْجُمْهُورِيَّةُ الْجَزَائِرِيَّةُ الدِّيمُقْرَاطِيَّةُ الشَّعْبِيَّةُ

وَلَايَةُ

نُسْخَةٌ مِنْ سِجِلَاتِ شَهَادَاتِ الْوَفَاةِ

دَائِرَةُ

بَلَدِيَّةُ

بناريخ 26 سبتمبر 2004 ب. و. ل. د.

الحالة المدنية

على الساعة

الدقيقة

رقم الشهادة 1814

1918

نوف جبار زهرية المولود ب. و. ل. د. ولاية و. ل. د.

15 مارس 1985

السنة المهنة

إن جبار زهرية

و. ل. د. و. ل. د.

حزب تاريخ

ب. على الساعة

إعتماداً على تصريح أدلى به السيد

السكان بالبلدية والذي بعد تلاوة هذا العقد وقع معنا نحن

ضابط الحالة المدنية

نسخة مطابقة للأصل:

الإمضاءات

2004/09

حزب تاريخ

شهادة

ضابط الحالة المدنية

رئيس البلدية
والأمناء
المختارون

الكتابة المطابقة للإسم واللقب
04/04/04 R. 334



THE LAW OFFICES OF
ANTHONY DRAGO, JR., P.C.

Anthony Drago, Jr.*
Cynthia M. Vega**

35 INDIA STREET, 2ND FLOOR
BOSTON, MA 02110

* Admitted in Massachusetts and New York
** Admitted in Maryland

(TEL) 617-357-0400
(FAX) 617-357-8353

September 3, 2004

U.S. Citizenship and Immigration Services
JFK Building
Government Center
Boston, MA 02203
Attn: Officer Richard Simmons

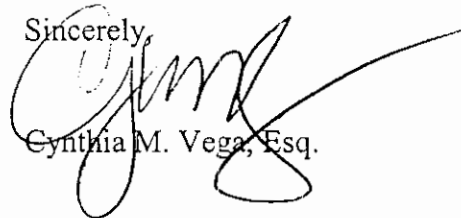
RE: Second Status Inquiry for I-485 interview for Mohamed Djebbar, A-95-477-062, interview held on 04/05/2004

Dear Officer Simmons:

Enclosed please find a copy of a status request submitted to you on June 3, 2004. As stated in the initial letter, Mr. Djebbar was interviewed on April 5, 2004 in connection with his application to adjust status to permanent resident. A decision could not be made at the time of his interview because a security check had not cleared. It has now been about five months since his interview and we have yet to receive correspondence regarding the status of Mr. Djebbar's case.

Please notify our office regarding the status of the case. If you have any questions, please contact me.

Sincerely,



Cynthia M. Vega, Esq.



THE LAW OFFICES OF
ANTHONY DRAGO, JR., P.C.

Anthony Drago, Jr.*
Cynthia M. Vega**

35 INDIA STREET, 2ND FLOOR
BOSTON, MA 02110

* Admitted in Massachusetts and New York
** Admitted in Maryland

(TEL) 617-357-0400
(FAX) 617-357-8353

June 3, 2004

U.S. Department of Justice
U.S. Citizenship and Immigration Services
JFK Building
Government Center
Boston, MA 02203
Attn: Officer Simmons

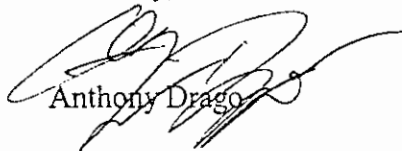
RE: Status Inquiry for I-485 interview for Mohamed Djebbar, A-95-477-062, held on 04/05/2004

Dear Officer Simmons:

The above-referenced was interviewed on April 5, 2004 in connection with his application to adjust status to permanent resident. At the time of the interview a decision could not be made and to date we have not received any correspondence from your office regarding his case.

Please notify our office regarding the status of the case. If you have any questions, please contact me.

Sincerely,



Anthony Drago

JS 44 (Rev. 11/04)

05-11243 JLT

CIVIL COVER SHEET

The JS 44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. (SEE INSTRUCTIONS ON THE REVERSE OF THE FORM.)

I. (a) PLAINTIFFS

Mohamed Djebar

DEFENDANTS

United States Attorney General, Alberto Gonzales, et al.

(b) County of Residence of First Listed Plaintiff Suffolk

(EXCEPT IN U.S. PLAINTIFF CASES)

County of Residence of First Listed Defendant Suffolk

(IN U.S. PLAINTIFF CASES ONLY)

NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE LAND INVOLVED.

(c) Attorney's (Firm Name, Address, and Telephone Number)

Anthony Drago, Esq., Anthony Drago, Jr., P.C., 35 India Street, Boston, MA 02110 (617) 357-0400

Attorneys (If Known)

U.S. Attorney's Office, 1 Courthouse Way, Suite 9200, Boston, MA 02210

II. BASIS OF JURISDICTION (Place an "X" in One Box Only)

- ☐ 1 U.S. Government Plaintiff
- ☐ 2 U.S. Government Defendant
- ☐ 3 Federal Question (U.S. Government Not a Party)
- ☐ 4 Diversity (Indicate Citizenship of Parties in Item III)

III. CITIZENSHIP OF PRINCIPAL PARTIES (Place an "X" in One Box for Plaintiff and One Box for Defendant)

- | | | | | | |
|---|----------------------------|----------------------------|---|----------------------------|----------------------------|
| | PTF | DEF | | PTF | DEF |
| Citizen of This State | <input type="checkbox"/> 1 | <input type="checkbox"/> 1 | Incorporated or Principal Place of Business In This State | <input type="checkbox"/> 4 | <input type="checkbox"/> 4 |
| Citizen of Another State | <input type="checkbox"/> 2 | <input type="checkbox"/> 2 | Incorporated and Principal Place of Business In Another State | <input type="checkbox"/> 5 | <input type="checkbox"/> 5 |
| Citizen or Subject of a Foreign Country | <input type="checkbox"/> 3 | <input type="checkbox"/> 3 | Foreign Nation | <input type="checkbox"/> 6 | <input type="checkbox"/> 6 |

IV. NATURE OF SUIT (Place an "X" in One Box Only)

CONTRACT	TORTS	FORFEITURE/PENALTY	BANKRUPTCY	OTHER STATUTES
<input type="checkbox"/> 110 Insurance <input type="checkbox"/> 120 Marine <input type="checkbox"/> 130 Miller Act <input type="checkbox"/> 140 Negotiable Instrument <input type="checkbox"/> 150 Recovery of Overpayment & Enforcement of Judgment <input type="checkbox"/> 151 Medicare Act <input type="checkbox"/> 152 Recovery of Defaulted Student Loans (Excl. Veterans) <input type="checkbox"/> 153 Recovery of Overpayment of Veteran's Benefits <input type="checkbox"/> 160 Stockholders' Suits <input type="checkbox"/> 190 Other Contract <input type="checkbox"/> 195 Contract Product Liability <input type="checkbox"/> 196 Franchise	PERSONAL INJURY <input type="checkbox"/> 310 Airplane <input type="checkbox"/> 315 Airplane Product Liability <input type="checkbox"/> 320 Assault, Libel & Slander <input type="checkbox"/> 330 Federal Employers' Liability <input type="checkbox"/> 340 Marine <input type="checkbox"/> 345 Marine Product Liability <input type="checkbox"/> 350 Motor Vehicle <input type="checkbox"/> 355 Motor Vehicle Product Liability <input type="checkbox"/> 360 Other Personal Injury PERSONAL INJURY <input type="checkbox"/> 362 Personal Injury - Med. Malpractice <input type="checkbox"/> 365 Personal Injury - Product Liability <input type="checkbox"/> 368 Asbestos Personal Injury Product Liability PERSONAL PROPERTY <input type="checkbox"/> 370 Other Fraud <input type="checkbox"/> 371 Truth in Lending <input type="checkbox"/> 380 Other Personal Property Damage <input type="checkbox"/> 385 Property Damage Product Liability	<input type="checkbox"/> 610 Agriculture <input type="checkbox"/> 620 Other Food & Drug <input type="checkbox"/> 625 Drug Related Seizure of Property 21 USC 881 <input type="checkbox"/> 630 Liquor Laws <input type="checkbox"/> 640 R.R. & Truck <input type="checkbox"/> 650 Airline Regs. <input type="checkbox"/> 660 Occupational Safety/Health <input type="checkbox"/> 690 Other	<input type="checkbox"/> 422 Appeal 28 USC 158 <input type="checkbox"/> 423 Withdrawal 28 USC 157 PROPERTY RIGHTS <input type="checkbox"/> 820 Copyrights <input type="checkbox"/> 830 Patent <input type="checkbox"/> 840 Trademark LABOR <input type="checkbox"/> 710 Fair Labor Standards Act <input type="checkbox"/> 720 Labor/Mgmt. Relations <input type="checkbox"/> 730 Labor/Mgmt. Reporting & Disclosure Act <input type="checkbox"/> 740 Railway Labor Act <input type="checkbox"/> 790 Other Labor Litigation <input type="checkbox"/> 791 Empl. Ret. Inc. Security Act	<input type="checkbox"/> 400 State Reapportionment <input type="checkbox"/> 410 Antitrust <input type="checkbox"/> 430 Banks and Banking <input type="checkbox"/> 450 Commerce <input type="checkbox"/> 460 Deportation <input type="checkbox"/> 470 Racketeer Influenced and Corrupt Organizations <input type="checkbox"/> 480 Consumer Credit <input type="checkbox"/> 490 Cable/Sat TV <input type="checkbox"/> 810 Selective Service <input type="checkbox"/> 850 Securities/Commodities/Exchange <input type="checkbox"/> 875 Customer Challenge 12 USC 3410 <input type="checkbox"/> 890 Other Statutory Actions <input type="checkbox"/> 891 Agricultural Acts <input type="checkbox"/> 892 Economic Stabilization Act <input type="checkbox"/> 893 Environmental Matters <input type="checkbox"/> 894 Energy Allocation Act <input type="checkbox"/> 895 Freedom of Information Act <input type="checkbox"/> 900 Appeal of Fee Determination Under Equal Access to Justice <input type="checkbox"/> 950 Constitutionality of State Statutes
REAL PROPERTY <input type="checkbox"/> 210 Land Condemnation <input type="checkbox"/> 220 Foreclosure <input type="checkbox"/> 230 Rent Lease & Ejectment <input type="checkbox"/> 240 Torts to Land <input type="checkbox"/> 245 Tort Product Liability <input type="checkbox"/> 290 All Other Real Property	CIVIL RIGHTS <input type="checkbox"/> 441 Voting <input type="checkbox"/> 442 Employment <input type="checkbox"/> 443 Housing/Accommodations <input type="checkbox"/> 444 Welfare <input type="checkbox"/> 445 Amer. w/Disabilities - Employment <input type="checkbox"/> 446 Amer. w/Disabilities - Other <input type="checkbox"/> 440 Other Civil Rights	PRISONER PETITIONS <input type="checkbox"/> 510 Motions to Vacate Sentence Habeas Corpus: <input type="checkbox"/> 530 General <input type="checkbox"/> 535 Death Penalty <input checked="" type="checkbox"/> 540 Mandamus & Other <input type="checkbox"/> 550 Civil Rights <input type="checkbox"/> 555 Prison Condition	SOCIAL SECURITY <input type="checkbox"/> 861 HIA (1395ff) <input type="checkbox"/> 862 Black Lung (923) <input type="checkbox"/> 863 DIWC/DIWW (405(g)) <input type="checkbox"/> 864 SSID Title XVI <input type="checkbox"/> 865 RSI (405(g)) FEDERAL TAX SUITS <input type="checkbox"/> 870 Taxes (U.S. Plaintiff or Defendant) <input type="checkbox"/> 871 IRS—Third Party 26 USC 7609	

V. ORIGIN

(Place an "X" in One Box Only)

- ☒ 1 Original Proceeding
- ☐ 2 Removed from State Court
- ☐ 3 Remanded from Appellate Court
- ☐ 4 Reinstated or Reopened
- ☐ 5 Transferred from another district (specify)
- ☐ 6 Multidistrict Litigation
- ☐ 7 Appeal to District Judge from Magistrate Judgment

Cite the U.S. Civil Statute under which you are filing (Do not cite jurisdictional statutes unless diversity):
28 USC Section 1361**VI. CAUSE OF ACTION**

Brief description of cause:

Mandamus action brought to compel U.S. CIS to adjudicate Plaintiff's application to adjust status

VII. REQUESTED IN COMPLAINT:☐ CHECK IF THIS IS A CLASS ACTION UNDER F.R.C.P. 23**DEMAND \$**

CHECK YES only if demanded in complaint:

JURY DEMAND: ☐ Yes ☒ No**VIII. RELATED CASE(S) IF ANY**

(See instructions):

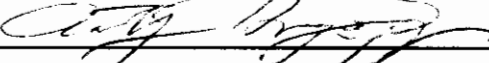
JUDGE

DOCKET NUMBER

DATE

SIGNATURE OF ATTORNEY OF RECORD

6-14-05



FOR OFFICE USE ONLY

RECEIPT #

AMOUNT

APPLYING IFP

JUDGE

MAG. JUDGE

UNITED STATES DISTRICT COURT
DISTRICT OF MASSACHUSETTS

1. Title of case (name of first party on each side only) Mohamed Djebbar v. Alberto Gonzales, et. al.
2. Category in which the case belongs based upon the numbered nature of suit code listed on the civil cover sheet. (See local rule 40.1(a)(1)).
- ☐ I. 160, 410, 470, 535, R.23, REGARDLESS OF NATURE OF SUIT.
- ☒ II. 195, 196, 368, 400, 440, 441-446, 540, 550, 555, 625, 710, 720, 730, *Also complete AO 120 or AO 121 for patent, trademark or copyright cases
740, 790, 791, 820*, 830*, 840*, 850, 890, 892-894, 895, 950.
- ☐ III. 110, 120, 130, 140, 151, 190, 210, 230, 240, 245, 290, 310, 315, 320, 330, 340, 345, 350, 355, 360, 362, 365, 370, 371, 380, 385, 450, 891.
- ☐ IV. 220, 422, 423, 430, 460, 480, 490, 510, 530, 610, 620, 630, 640, 650, 660, 690, 810, 861-865, 870, 871, 875, 900.
- ☐ V. 150, 152, 153.
3. Title and number, if any, of related cases. (See local rule 40.1(g)). If more than one prior related case has been filed in this district please indicate the title and number of the first filed case in this court.
n/a
4. Has a prior action between the same parties and based on the same claim ever been filed in this court?
YES ☐ NO ☒
5. Does the complaint in this case question the constitutionality of an act of congress affecting the public interest? (See 28 USC §2403)
YES ☐ NO ☒
If so, is the U.S.A. or an officer, agent or employee of the U.S. a party?
YES ☐ NO ☒
6. Is this case required to be heard and determined by a district court of three judges pursuant to title 28 USC §2284?
YES ☐ NO ☒
7. Do all of the parties in this action, excluding governmental agencies of the united states and the Commonwealth of Massachusetts ("governmental agencies"), residing in Massachusetts reside in the same division? - (See Local Rule 40.1(d)).
YES ☒ NO ☐
- A. If yes, in which division do all of the non-governmental parties reside?
Eastern Division ☒ Central Division ☐ Western Division ☐
- B. If no, in which division do the majority of the plaintiffs or the only parties, excluding governmental agencies, residing in Massachusetts reside?
Eastern Division ☐ Central Division ☐ Western Division ☐
8. If filing a Notice of Removal - are there any motions pending in the state court requiring the attention of this Court? (If yes, submit a separate sheet identifying the motions)
YES ☐ NO ☒

(PLEASE TYPE OR PRINT)

ATTORNEY'S NAME Anthony Drago, Jr., Esq.ADDRESS 35 India Street - 2nd floorTELEPHONE NO. (617) 357-0400